

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10/1/2015

| (1)<br><u>Coverage</u>  | (2)<br><u>Annual Premium<br/>Volume (Illinois)*</u> | (3)<br><u>Percent<br/>Change (+ or -)**</u> |
|---|---|---|
| 1. Automobile Liability Private<br>Passenger Commercial       |   |   |
| 2. Automobile Physical Damage<br>Private Passenger Commercial |   |   |
| 3. Liability Other Than Auto                                  |   |   |
| 4. Burglary and Theft   |   |   |
| 5. Glass  |   |   |
| 6. Fidelity   |   |   |
| 7. Surety   |   |   |
| 8. Boiler and Machinery                                       | 956   | -15%  |
| 9. Fire   |   |   |
| 10. Extended Coverage   |   |   |
| 11. Inland Marine   |   |   |
| 12. Homeowners  |   |   |
| 13. Commercial Multi-Peril                                    |   |   |
| 14. Crop Hail   |   |   |
| 15. Other _____   |   |   |
| Line of Insurance   |   |   |

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): \_\_\_\_\_

Adoption of ISO \_\_\_\_\_

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Greenwich Insurance

Name of Company

Jill Kelly - Assistant Vice President

Official - Title

## Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision  
effective 10/01/2015 NB; 01/01/2016 RB.

|     | (1)<br>Coverage                                | (2)<br>Annual Premium<br>Volume (Illinois) * | (3)<br>Percent<br>Change (+or-) ** |
|-----|--|--|------------------------------------|
| 1.  | Automobile Liability Private<br>Passenger      |  |                                    |
|     | Commercial                                     |  |                                    |
| 2.  | Automobile Physical Damag<br>Private Passenger |  |                                    |
|     | Commercial                                     |  |                                    |
| 3.  | Liability Other Than Auto                      |  |                                    |
| 4.  | Burglary and Theft                             |  |                                    |
| 5.  | Glass  |  |                                    |
| 6.  | Fidelity                                       |  |                                    |
| 7.  | Surety   |  |                                    |
| 8.  | Boiler and Machinery                           | \$1,740,133                                  | -3.5%                              |
| 9.  | Fire   |  |                                    |
| 10. | Extended Coverage                              |  |                                    |
| 11. | Inland Marine                                  |  |                                    |
| 12. | Homeowners                                     |  |                                    |
| 13. | Commercial Multi-Peril                         |  |                                    |
| 14. | Crop Hail                                      |  |                                    |
| 15. | Other  |  |                                    |

## Line of Insurance

Does filing only apply to certain territory (territories) or certain  
Classes? If so,  
specify: no

Brief description of filing. (If filing follows rates of an advisory  
Organization, specify  
organization): Independent rate and rule revision

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new  
rates.

The Hartford Steam Boiler Inspection and Insurance Company

Name of Company  
Faye W. Neilan, Asst. V.P.

Official - Title